9:30 1:00

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Harry D. Letourneau DATE 3/29/84 PERMIT NO. 58

PHONE: Business ______ Home ______

LOCATION 1100 TZ 1179 About 1 1/4 mile on left beside Morrow house S. R. No. ______

SUBDIVISION NAME Wood Land Hills LOT NO. 15 SECTION OR BLOCK NO. ______

House (X) Mobile Home ( ) Business ( ) Other ______

No. Bedrooms 4 No. Bathrooms 2 1/2

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes (X) No ( )

Auto. Wash. Machine Yes (X) No ( )

Site Suitable Yes (X) No ( )

Lot Area 30,000 Ft² +

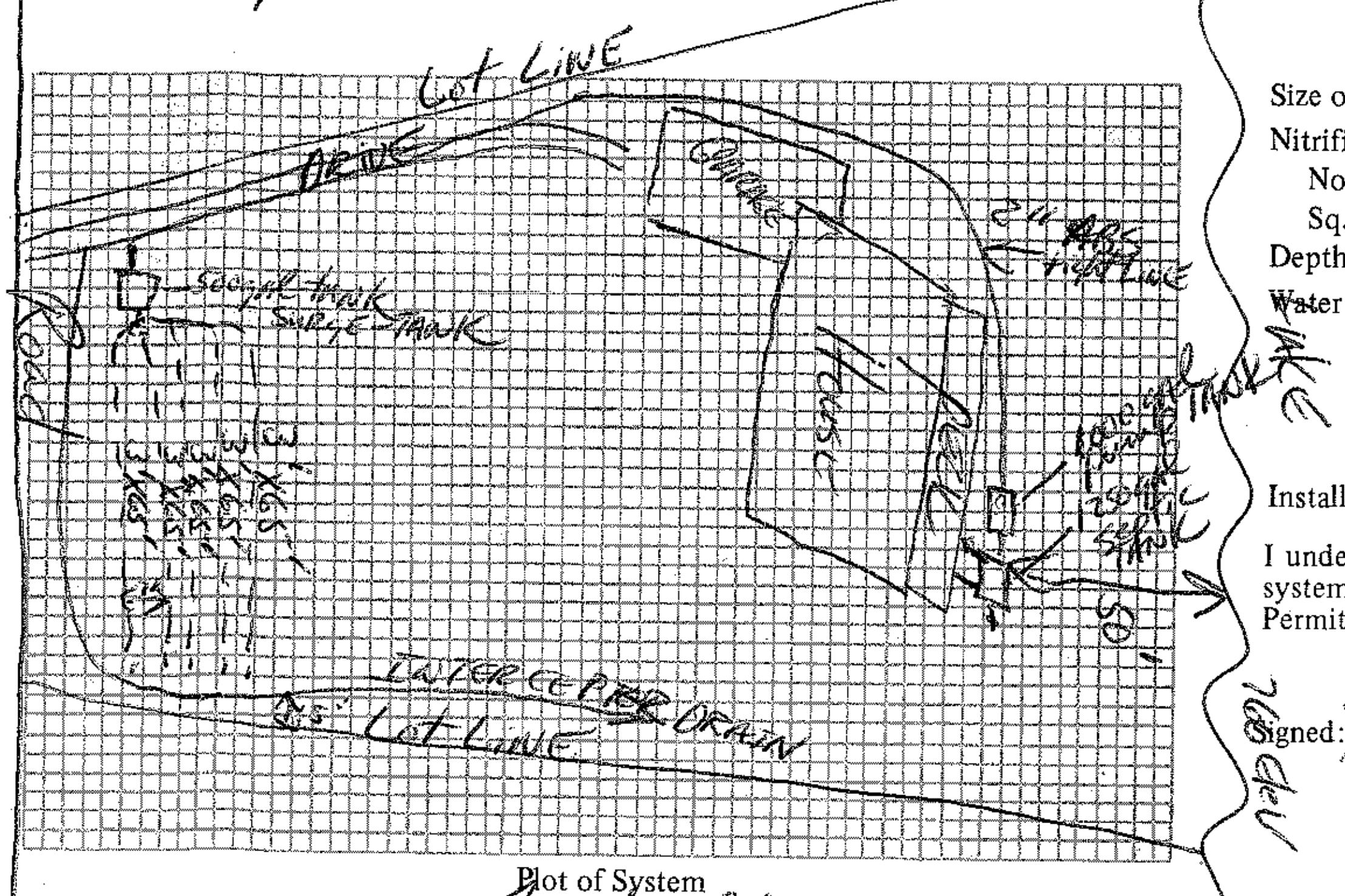
Character & Porosity of Soil clay loam (drainage Mottles At 24"-30")

Percolation Rate 0.5 gpd/ft²/day

Topography 2-8%

Depth to Water Table 4' +

Rock or other impervious formations None obs.



Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 5

Sq. Ft. 960 Linear Ft. 320'

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (X)

Community H2O

Installed by ______

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: X Jerry R. LeTourneau

Plot of System

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Keep system shallow about 1.5' – 2' cover MAXimum. Keep interceptor drain 5' from nitrification field; install high water alarm and well tile access to pump chamber

CERTIFICATE OF COMPLETION BY ______ DATE ______

EXISTING SYSTEM CHECKED BY: ______ DATE ______

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold